



# Michigan Department of Energy, Labor & Economic Growth

## Speaker Request Form

### Event Information

Event Name:	Topic of Speech/Remarks: <i>(Please be specific)</i>		
Date of Event:	Time of Event: Time Speaker to begin: _____ end time: _____		
Location of Event:			
Name of Speaker you would like to request:			
Event Request: <i>(Please check all that apply)</i>		General Information:	
Keynote Speech Presentation Brief Remarks Question & Answers Panel Greetings/Comments Other: _____		Yes      No  Podium Laptop/Projector Internet Access Would you accept a surrogate speaker?	
Type of Audience and Background:			
How many are expected to be in the audience:	Provide Handouts:      Yes      No		

### Contact Information

Requestor's Name:		Title:	
Organization/Association/Firm/Office:			
Address:			
Office Phone:	Cell Phone:	Fax Number:	
E-Mail Address:			
2 <sup>nd</sup> Contact Name & Title:		Phone: E-Mail:	

*If available, please attach event agenda.*

Please submit the completed form to [mediainfo@michigan.gov](mailto:mediainfo@michigan.gov) or print and fax to 517 241-1580.